

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
WESTERN DIVISION

In Re: §
§
DIXON, SHIRLEY F. § Case No. 15-81827
§
Debtor §

**CHAPTER 7 TRUSTEE'S FINAL ACCOUNT AND DISTRIBUTION
REPORT CERTIFICATION THAT THE ESTATE HAS BEEN FULLY
ADMINISTERED AND APPLICATION TO BE DISCHARGED (TDR)**

BERNARD J. NATALE, TRUSTEE, chapter 7 trustee, submits this Final Account, Certification that the Estate has been Fully Administered and Application to be Discharged.

1) All funds on hand have been distributed in accordance with the Trustee's Final Report and, if applicable, any order of the Court modifying the Final Report. The case is fully administered and all assets and funds which have come under the trustee's control in this case have been properly accounted for as provided by law. The trustee hereby requests to be discharged from further duties as a trustee.

2) A summary of assets abandoned, assets exempt, total distributions to claimants, claims discharged without payment, and expenses of administration is provided below:

Assets Abandoned: 1,910.00 (Without deducting any secured claims)	Assets Exempt: 0.00
Total Distributions to Claimants: 43,116.78	Claims Discharged Without Payment: 65,910.33
Total Expenses of Administration: 46,957.10	

3) Total gross receipts of \$ 105,073.88 (see **Exhibit 1**), minus funds paid to the debtor and third parties of \$ 15,000.00 (see **Exhibit 2**), yielded net receipts of \$ 90,073.88 from the liquidation of the property of the estate, which was distributed as follows:

	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
SECURED CLAIMS (from Exhibit 3)	\$ 3,599.00	\$ 16,150.00	\$ 16,150.00	\$ 16,150.00
PRIORITY CLAIMS: CHAPTER 7 ADMIN. FEES AND CHARGES (from Exhibit 4)	NA	46,957.10	46,957.10	46,957.10
PRIOR CHAPTER ADMIN. FEES AND CHARGES (from Exhibit 5)	NA	NA	NA	NA
PRIORITY UNSECURED CLAIMS (from Exhibit 6)	NA	NA	NA	NA
GENERAL UNSECURED CLAIMS (from Exhibit 7)	60,316.45	38,322.66	32,560.66	26,966.78
TOTAL DISBURSEMENTS	\$ 63,915.45	\$ 101,429.76	\$ 95,667.76	\$ 90,073.88

4) This case was originally filed under chapter 7 on 07/15/2015 . The case was pending for 44 months.

5) All estate bank statements, deposit slips, and canceled checks have been submitted to the United States Trustee.

6) An individual estate property record and report showing the final accounting of the assets of the estate is attached as **Exhibit 8**. The cash receipts and disbursements records for each estate bank account, showing the final accounting of the receipts and disbursements of estate funds is attached as **Exhibit 9**.

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Dated: 02/20/2019 By: /s/BERNARD J. NATALE, TRUSTEE
Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

**EXHIBITS TO
FINAL ACCOUNT**

EXHIBIT 1 – GROSS RECEIPTS

DESCRIPTION	UNIFORM TRAN. CODE ¹	\$ AMOUNT RECEIVED
Potential Personal Injury with Attorney Crosby	1142-000	105,073.88
TOTAL GROSS RECEIPTS		\$ 105,073.88

¹The Uniform Transaction Code is an accounting code assigned by the trustee for statistical reporting purposes.

EXHIBIT 2 – FUNDS PAID TO DEBTOR & THIRD PARTIES

PAYEE	DESCRIPTION	UNIFORM TRAN. CODE	\$ AMOUNT PAID
Shirley F. Dixon	Exemptions	8100-002	15,000.00
TOTAL FUNDS PAID TO DEBTOR & THIRD PARTIES			\$ 15,000.00

EXHIBIT 3 – SECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6D)	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
	Attorney George P. Hampilos Hampilos & Langley, Ltd.		0.00	NA	NA	0.00
	Attorney Thomas Luchetti		0.00	NA	NA	0.00
	Grant Park Auto Sales		3,599.00	NA	NA	0.00
	Blue Cross lien	4220-000	NA	10,000.00	10,000.00	10,000.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6D)	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
	Lien paid Rockford	4220-000	NA	1,150.00	1,150.00	1,150.00
	State Farm Lien	4220-000	NA	5,000.00	5,000.00	5,000.00
TOTAL SECURED CLAIMS			\$ 3,599.00	\$ 16,150.00	\$ 16,150.00	\$ 16,150.00

EXHIBIT 4 – CHAPTER 7 ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
BERNARD J. NATALE LTD	2100-000	NA	250.00	250.00	250.00
Megan S Heeg	2100-000	NA	7,500.00	7,500.00	7,500.00
Megan S Heeg	2200-000	NA	5.68	5.68	5.68
Associated Bank	2600-000	NA	10.00	10.00	10.00
Rabobank, N.A.	2600-000	NA	0.00	0.00	0.00
Ehrmann Gehlbach Badger Lee & Considine	3110-000	NA	4,510.00	4,510.00	4,510.00
Ehrmann Gehlbach Badger Lee & Considine	3120-000	NA	196.22	196.22	196.22
Attorneys Fees The Crosby Law Firm	3210-000	NA	6,666.67	6,666.67	6,666.67
special counsel fees	3210-000	NA	26,666.64	26,666.64	26,666.64
Attorneys Fees The Crosby Law Firm	3220-000	NA	706.89	706.89	706.89
special counsel	3220-000	NA	445.00	445.00	445.00

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
TOTAL CHAPTER 7 ADMIN. FEES AND CHARGES		\$ NA	\$ 46,957.10	\$ 46,957.10	\$ 46,957.10

EXHIBIT 5 – PRIOR CHAPTER ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
NA: NA	NA	NA	NA	NA	NA
TOTAL PRIOR CHAPTER ADMIN. FEES AND CHARGES		\$ NA	\$ NA	\$ NA	\$ NA

EXHIBIT 6 – PRIORITY UNSECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6E)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
NA	NA	NA	NA	NA	NA	NA
TOTAL PRIORITY UNSECURED CLAIMS			\$ NA	\$ NA	\$ NA	\$ NA

EXHIBIT 7 – GENERAL UNSECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	Affordable Cash Advance c/o Attorney D. Richard Haime		4,447.09	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	ALL CREDIT LENDERS		0.00	NA	NA	0.00
	All Credit Lenders		3,419.10	NA	NA	0.00
	Allied Business Accounts		1,793.30	NA	NA	0.00
	Amberwood Care Center		9,981.28	NA	NA	0.00
	Ameriloan		300.00	NA	NA	0.00
	Aspire Visa Card Services		507.47	NA	NA	0.00
	Asset Acceptance LLC		0.00	NA	NA	0.00
	Cash Loan Store		435.57	NA	NA	0.00
	Catherine's c/o Comenity BK Dept fka WFNNB		265.56	NA	NA	0.00
	Cortrust Bank		589.56	NA	NA	0.00
	Creditors Protection Service		3,970.65	NA	NA	0.00
	Crusader Clinic		177.77	NA	NA	0.00
	East Bay Finding, LLC c/o Resurgent Capital Solutions		0.00	NA	NA	0.00
	East Side Lenders		415.00	NA	NA	0.00
	Elite Recovery Services		1,035.25	NA	NA	0.00
	Fiat Financial Money Center		1,411.15	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	First National Credit Card		532.22	NA	NA	0.00
	First Premier Bank		354.93	NA	NA	0.00
	FRONTLINE RECOVERY GROUP		0.00	NA	NA	0.00
	HSBC Card Services		1,019.12	NA	NA	0.00
	Jefferson Capital Systems LLC		0.00	NA	NA	0.00
	McCauley & Associates Co.		1,134.25	NA	NA	0.00
	Midland Credit Management		1,987.00	NA	NA	0.00
	MIDLAND CREDIT MANAGEMENT		0.00	NA	NA	0.00
	Midwest Title Loans		4,121.76	NA	NA	0.00
	Mutual Management Services Inc		1,254.75	NA	NA	0.00
	Mutual Management Services Inc c/o Attorney James C. Thompson		1,603.67	NA	NA	0.00
	Omnicare		333.05	NA	NA	0.00
	Palisades Collection LLC		533.06	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	PayDay One		862.52	NA	NA	0.00
	PennCredit		60.28	NA	NA	0.00
	Primesource of Ohio		441.00	NA	NA	0.00
	Rockford Gastroenterology Assoc		340.83	NA	NA	0.00
	Rockford Health Systems		81.81	NA	NA	0.00
	Rockford Health Systems Respectful Care		10,126.49	NA	NA	0.00
	Rockford Mercantile Agency Inc		841.51	NA	NA	0.00
	Royce Financial		322.00	NA	NA	0.00
	SFC of Illinois, L.P. d/b/a Security Finance		335.00	NA	NA	0.00
	Swedish American Hospital		75.45	NA	NA	0.00
	Tate & Kirlin Associates		589.56	NA	NA	0.00
	Tribute Card Service		1,018.44	NA	NA	0.00
	VATIV Recovery Solutions LLC d/b/a SMC		0.00	NA	NA	0.00
1	Crusader Clinic	7100-000	NA	137.00	137.00	137.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
3	Grant Park Auto Sales, Inc.	7100-000	NA	5,762.00	0.00	0.00
3-2	Grant Park Auto Sales, Inc.	7100-000	3,599.00	5,762.00	5,762.00	5,762.00
2	Midland Credit Management Inc.	7100-000	NA	934.39	934.39	934.39
5	Blue Cross Blue Shield Of Illinois	7200-000	NA	20,118.45	20,118.45	15,744.10
6	Rockford Health Physicians	7200-000	NA	5,278.82	5,278.82	4,131.04
4	SFC Central Bankruptcy	7200-000	NA	330.00	330.00	258.25
TOTAL GENERAL UNSECURED CLAIMS			\$ 60,316.45	\$ 38,322.66	\$ 32,560.66	\$ 26,966.78

**INDIVIDUAL ESTATE PROPERTY RECORD AND REPORT
ASSET CASES**

Exhibit 8

Case No: 15-81827 TML Judge: Thomas M. Lynch Trustee Name: BERNARD J. NATALE, TRUSTEE
Case Name: DIXON, SHIRLEY F. Date Filed (f) or Converted (c): 07/15/2015 (f)
341(a) Meeting Date: 08/20/2015
For Period Ending: 02/20/2019 Claims Bar Date: 02/08/2016

1	2	3	4	5	6
Asset Description (Scheduled and Unscheduled (u) Property)	Petition/ Unscheduled Values	Est Net Value (Value Determined by Trustee, Less Liens, Exemptions, and Other Costs)	Property Formally Abandoned OA=554(a)	Sale/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
1. Associated Bank/Checking	210.00	0.00		0.00	FA
2. Misc. household goods and furnishings	1,000.00	0.00		0.00	FA
3. Clothing and personal items	400.00	0.00		0.00	FA
4. 2006 Ford 500 (Does Not Run)	300.00	0.00		0.00	FA
5. Potential Personal Injury with Attorney Crosby	Unknown	68,850.00		105,073.88	FA

Gross Value of Remaining Assets

TOTALS (Excluding Unknown Values)	\$1,910.00	\$68,850.00	\$105,073.88	\$0.00
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(Total Dollar Amount in Column 6)

Major activities affecting case closing which are not reflected above, and matters pending, date of hearing or sale, and other action:

Initial Projected Date of Final Report (TFR): 12/31/2018

Current Projected Date of Final Report (TFR): 12/31/2018

ESTATE CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No: 15-81827
Case Name: DIXON, SHIRLEY F.

Trustee Name: BERNARD J. NATALE, TRUSTEE

Exhibit 9

Bank Name: Associated Bank

Account Number/CD#: XXXXXX9036

Checking

Taxpayer ID No: XX-XXX5769

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 02/20/2019

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
09/20/18	5	Crosby & Associates PC Iolita Account 475 Executive Parkway Rockford, IL 61107-6629	Personal Injury Balance of funds being held in escrow by Attorney Crosby	1142-000	\$5,073.88		\$5,073.88
10/05/18		Associated Bank	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b) (1), and 507(a)(2)	2600-000		\$10.00	\$5,063.88
11/21/18	1101	BERNARD J. NATALE 1639 N ALPINE RD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Final distribution creditor account # debtor SS#<debtor ssn masked> representing a payment of 100.00 % per court order.	2100-000		\$250.00	\$4,813.88
11/21/18	1102	SFC Central Bankruptcy PO Box 1893 Spartanburg, SC 29304	Final distribution to claim 4 creditor account # debtor SS#<debtor ssn masked> representing a payment of 18.71 % per court order.	7200-000		\$61.75	\$4,752.13
11/21/18	1103	Blue Cross Blue Shield Of Illinois 3405 Liberty Drive Springfield, IL 62704	Final distribution to claim 5 creditor account # debtor SS#<debtor ssn masked> representing a payment of 18.71 % per court order.	7200-000		\$3,764.41	\$987.72
11/21/18	1104	Rockford Health Physicians 2300 N. Rockton Avenue Rockford, IL 61103	Final distribution to claim 6 creditor account # debtor SS#<debtor ssn masked> representing a payment of 18.71 % per court order.	7200-000		\$987.72	\$0.00

COLUMN TOTALS	\$5,073.88	\$5,073.88
Less: Bank Transfers/CD's	\$0.00	\$0.00
Subtotal	\$5,073.88	\$5,073.88
Less: Payments to Debtors	\$0.00	\$0.00
Net	\$5,073.88	\$5,073.88

ESTATE CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No: 15-81827
Case Name: DIXON, SHIRLEY F.

Trustee Name: BERNARD J. NATALE, TRUSTEE
Bank Name: Rabobank, N.A.
Account Number/CD#: XXXXXX8566
Checking

Exhibit 9

Taxpayer ID No: XX-XXX5769
For Period Ending: 02/20/2019

Blanket Bond (per case limit): \$3,000.00
Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
03/14/16		Law Office of Crosby & Associates, P.C. 475 Executive Parkway Rockford, IL 61107-6629	Gross personal injury settlement proceeds		\$11,476.44		\$11,476.44
			Gross Receipts \$11,476.44				
		Attorneys Fees The Crosby Law Firm	Attorneys Fees The Crosby Law Firm (\$6,666.67)	3210-000			
		Attorneys Fees The Crosby Law Firm	Attorneys Fees The Crosby Law Firm (\$706.89)	3220-000			
		Lien paid Rockford	Lien paid Rockford (\$1,150.00)	4220-000			
	5		Potential Personal Injury with Attorney Crosby \$20,000.00	1142-000			
03/14/16		Rabobank, N.A. 90 E Thousand Oaks Blvd Ste 300 Thousand Oaks, CA 91360	Bank and Technology Services Fee	2600-000		\$10.00	\$11,466.44
03/31/16		Rabobank, N.A. 90 E Thousand Oaks Blvd Ste 300 Thousand Oaks, CA 91360	Bank and Technology Services Fee	2600-000		\$15.89	\$11,450.55
05/31/16		Rabobank, N.A. 90 E Thousand Oaks Blvd Ste 300 Thousand Oaks, CA 91360	Bank and Technology Services Fee	2600-000		\$15.87	\$11,434.68
06/08/16		Rabobank, N.A. 90 E Thousand Oaks Blvd Ste 300 Thousand Oaks, CA 91360	Bank and Technology Services Fee Adjustment	2600-000		(\$41.76)	\$11,476.44
06/30/16	105	Shirley F. Dixon	Debtor's exemption portion per court Order dated 2/17/16	8100-002		\$11,476.44	\$0.00
10/28/16		Law office of Crosby & Associates	personal injury settlement proceeds		\$37,888.36		\$37,888.36
			Gross Receipts \$37,888.36				
		special counsel	special counsel (\$445.00)	3220-000			

Page Subtotals:

\$49,364.80

\$11,476.44

FORM 2
ESTATE CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No: 15-81827
Case Name: DIXON, SHIRLEY F.

Trustee Name: BERNARD J. NATALE, TRUSTEE

Exhibit 9

Bank Name: Rabobank, N.A.

Account Number/CD#: XXXXXX8566

Checking

Taxpayer ID No: XX-XXX5769

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 02/20/2019

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
		special counsel fees	special counsel fees (\$26,666.64)	3210-000			
		Blue Cross lien	Blue Cross lien (\$10,000.00)	4220-000			
		State Farm Lien	State Farm Lien (\$5,000.00)	4220-000			
	5		Potential Personal Injury with Attorney Crosby \$80,000.00	1142-000			
11/02/16	110	Shirley F. Dixon	Debtor's remaining personal injury exemption per court order dated 9/14/16	8100-002		\$3,523.56	\$34,364.80
12/28/16	111	Ehrmann Gehlbach Badger Lee & Considine, LLC 215 E. First Street Dixon, IL 61021	Dividend paid 100.00% on \$4,510.00, Attorney for Trustee Fees (Trustee Firm); Reference:	3110-000		\$4,510.00	\$29,854.80
12/28/16	112	Ehrmann Gehlbach Badger Lee & Considine, LLC 215 E. First Street Dixon, IL 61021	Dividend paid 100.00% on \$196.22, Attorney for Trustee Expenses (Trustee Firm); Reference:	3120-000		\$196.22	\$29,658.58
12/28/16	113	Crusader Clinic 1200 West State Street Rockford, IL 61102	Dividend paid 100.00% on \$137.00; Claim# 1; Filed: \$137.00; Reference:	7100-000		\$137.00	\$29,521.58
12/28/16	114	Midland Credit Management, Inc. as agent for MIDLAND FUNDING LLC PO Box 2011 Warren, MI 48090	Dividend paid 100.00% on \$934.39; Claim# 2; Filed: \$934.39; Reference:	7100-000		\$934.39	\$28,587.19
12/28/16	115	Grant Park Auto Sales, Inc. 908 Broadway Rockford, IL 61104	Dividend paid 100.00% on \$5,762.00; Claim# 3 -2; Filed: \$5,762.00; Reference:	7100-000		\$5,762.00	\$22,825.19
12/28/16	116	SFC Central Bankruptcy PO Box 1893 Spartanburg, SC 29304	Dividend paid 59.54% on \$330.00; Claim# 4; Filed: \$330.00; Reference:	7200-000		\$196.50	\$22,628.69
12/28/16	117	Blue Cross Blue Shield of Illinois 3405 Liberty Drive Springfield, IL 62704	Dividend paid 59.54% on \$20,118.45; Claim# 5; Filed: \$30,118.45; Reference:	7200-000		\$11,979.69	\$10,649.00
12/28/16	118	Rockford Health Physicians 2300 N Rockton, Ave Rockford, IL 61103	Dividend paid 59.54% on \$5,278.82; Claim# 6; Filed: \$5,278.82; Reference:	7200-000		\$3,143.32	\$7,505.68

Page Subtotals:

\$0.00

\$30,382.68

FORM 2
ESTATE CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No: 15-81827
Case Name: DIXON, SHIRLEY F.

Trustee Name: BERNARD J. NATALE, TRUSTEE

Exhibit 9

Bank Name: Rabobank, N.A.

Account Number/CD#: XXXXXX8566

Checking

Taxpayer ID No: XX-XXX5769

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 02/20/2019

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
12/28/16	119	MEGAN G. HEEG	COMBINED CHECK FOR TRUSTEE COMPENSATION, EXPENSES AND INTEREST			\$7,505.68	\$0.00
		Heeg, Megan S	Dividend paid 100.00% on (\$7,500.00) \$5,686.78; Claim# ;Filed: \$5,686.78	2100-000			
		Heeg, Megan S	Dividend paid 100.00% on (\$5.68) \$130.97; Claim# ;Filed: \$130.97	2200-000			

COLUMN TOTALS	\$100,000.00	\$100,000.00
Less: Bank Transfers/CD's	\$0.00	\$0.00
Subtotal	\$100,000.00	\$100,000.00
Less: Payments to Debtors	\$0.00	\$15,000.00
Net	\$100,000.00	\$85,000.00

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ESTATE CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No: 15-81827
Case Name: DIXON, SHIRLEY F.

Trustee Name: BERNARD J. NATALE, TRUSTEE

Exhibit 9

Bank Name: Axos Bank

Account Number/CD#: XXXXXX0017

Checking

Taxpayer ID No: XX-XXX5769

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 02/20/2019

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
		No Transactions					\$0.00

COLUMN TOTALS	\$0.00	\$0.00
Less: Bank Transfers/CD's	\$0.00	\$0.00
Subtotal	\$0.00	\$0.00
Less: Payments to Debtors	\$0.00	\$0.00
Net	\$0.00	\$0.00

Page Subtotals:

\$0.00

\$0.00

Exhibit 9

TOTAL OF ALL ACCOUNTS			
	NET		ACCOUNT
	NET DEPOSITS	DISBURSEMENTS	BALANCE
XXXXXX0017 - Checking	\$0.00	\$0.00	\$0.00
XXXXXX8566 - Checking	\$100,000.00	\$85,000.00	\$0.00
XXXXXX9036 - Checking	\$5,073.88	\$5,073.88	\$0.00
	-----	-----	-----
	\$105,073.88	\$90,073.88	\$0.00
	(Excludes account transfers)	(Excludes payments to debtors)	Total Funds on Hand
Total Allocation Receipts:	\$0.00		
Total Net Deposits:	\$105,073.88		
Total Gross Receipts:	\$105,073.88		